

TRANSMITTAL FORM

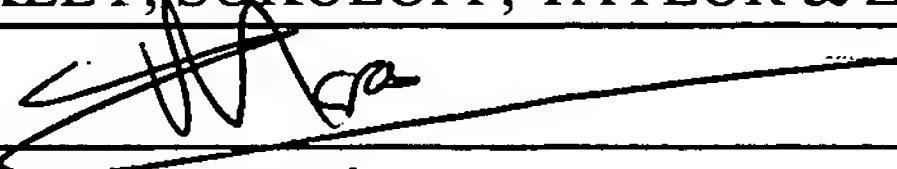
(to be used for all correspondence after initial filing)

		Application No.	10/605,228
		Filing Date	September 16, 2003
		First Named Inventor	Stephen J. Brown
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission	9	Attorney Docket Number	6858P001C4

ENCLOSURES (check all that apply)

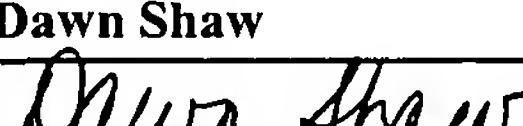
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Return postcard Request for Corrected filing Receipt (1 pg.) Corrected Filing Receipt (1 pg.) </div>
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

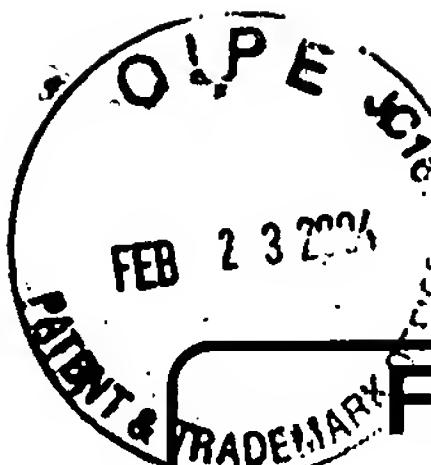
Firm or Individual name	André L. Marais, Reg. No. 48,095 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	02/18/04

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Dawn Shaw		
Signature		Date	2-18-2004

FEB 23 2003



TRADEMARK FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
0.00

Complete if Known	
Application Number	10/605,228
Filing Date	September 16, 2003
First Named Inventor	Stephen J Brown
Examiner Name	Unassigned
Group/Art Unit	Unassigned
Attorney Docket No.	6858P001C4

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity			Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee
SUBTOTAL (1)		(\$)		

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
<input type="text"/>	20**	= <input type="text"/> X <input type="text"/> = <input type="text"/>	<input type="text"/>
<input type="text"/>	3	= <input type="text"/> X <input type="text"/> = <input type="text"/>	<input type="text"/>

Large Entity	Small Entity			Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple Dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$)		

**or number previously paid, if greater, For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Small Entity			Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1051	130	2051	65	Surcharge - late filing fee or oath	<input type="text"/>
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	<input type="text"/>
2053	130	2053	130	Non-English specification	<input type="text"/>
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	<input type="text"/>
1804	920 *	1804	920 *	Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805	1,840 *	1805	1,840 *	Requesting publication of SIR after Examiner action	<input type="text"/>
1251	110	2251	55	Extension for reply within first month	<input type="text"/>
1252	420	2252	210	Extension for reply within second month	<input type="text"/>
1253	950	2253	475	Extension for reply within third month	<input type="text"/>
1254	1,480	2254	740	Extension for reply within fourth month	<input type="text"/>
1255	1,210	2255	605	Extension for reply within fifth month	<input type="text"/>
1404	330	2401	165	Notice of Appeal	<input type="text"/>
1402	330	2402	165	Filing a brief in support of an appeal	<input type="text"/>
1403	290	2403	145	Request for oral hearing	<input type="text"/>
1451	1,510	2451	1,510	Petition to institute a public use proceeding	<input type="text"/>
1452	110	2452	55	Petition to revive - unavoidable	<input type="text"/>
1453	1,330	2453	665	Petition to revive - unintentional	<input type="text"/>
1501	1,330	2501	665	Utility issue fee (or reissue)	<input type="text"/>
1502	480	2502	240	Design issue fee	<input type="text"/>
1503	640	2503	320	Plant issue fee	<input type="text"/>
1460	130	2460	130	Petitions to the Commissioner	<input type="text"/>
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	<input type="text"/>
1806	180	1806	180	Submission of Information Disclosure Stmt	<input type="text"/>
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
1801	770	2801	385	Request for Continued Examination (RCE)	<input type="text"/>
1802	900	1802	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify)					<input type="text"/>
Correction of the Filing Receipt					0.00

* Reduced by Basic Filing Fee Paid

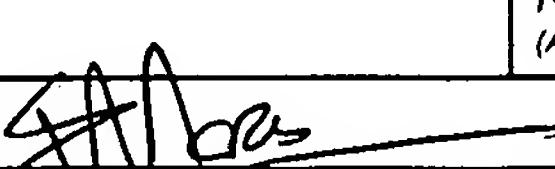
SUBTOTAL (3)

(\$)

0.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	André L. Marais	Registration No. (Attorney/Agent)	48,095	Telephone	(408) 947-8200
Signature				Date	02/18/06

Based on PTO/SB/17 (08-03) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 08/11/2003.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/605,228

Applicant: Stephen J. Brown

Filed: September 16, 2003
TC/A.U. Unassigned
Examiner: Unassigned

Docket No.: 6858P001C4
Customer No.: 08791

Confirmation No.: 2227

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on 2-18-2004

Date of Deposit

Dawn R. Shaw
Name of Person Mailing Correspondence

Dawn R. Shaw 2-18-2004
Signature Date

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

PRELIMINARY AMENDMENT

Sir:

Please amend the above-identified application as follow:

Amendments to the Specification are reflected on page 2 of this paper.